

OFFICIAL RESPONSES TO APPLICANT QUESTIONS RFA-2021-DPHS-06-SMALL

No.	Question	Answer
1.	Section 1, Subsection 1.1., Paragraph 1.1.2. What are the current services referenced in 1.1.2 for Population Health and Hotspotting Project (PHHP)?	https://sos.nh.gov/media/t3mpweib/045b-gc-agenda- 062420.pdf
2.	Section 1, Subsection 1.1., Paragraph 1.1.2. How will the vendor access the comprehensive data reports referenced in 1.1.2?	The Department will provide the reports to the selected Vendor.
3.	Section 1, Subsection 1.1., Paragraph 1.1.2. Please summarize the subject matter of the Medicare Bootcamp billing and coding trainings conducted over the last two years as referenced in 1.1.2.	Please see the current contract https://sos.nh.gov/media/t3mpweib/045b-gc-agenda-062420.pdf
4.	Section 1, Subsection 1.2., Paragraph 1.2.10., Subparagraph 1.2.10.2. What group is a part of the Population Health Peer Group referenced in 1.2.10.2.	The Population Health Peer Group consist of population health managers.
5.	Section 1, Subsection 1.3, Paragraph 1.3.2. Which, if any, of the following expenses must be covered by the vendor from the funds identified in 1.3.2.:	 Facility rental and related expenses for in-person events must be covered by the vendor as part of the funding identified in 1.3.2. Meal expenses for in-person events must be covered





	 Facility rental and related expenses for inperson events? Meal expenses for in-person events? Vendor travel expenses for in-person meetings? 	by the vendor as part of the funding identified in 1.3.2 but cannot be separate from a facility rental fee. Meals by themselves are not an allowable expense per the Small Rural Hospital grant guidance. 3. Travel expenses are covered by the funding referenced in 1.3.2.
6.	Section 1, Subsection 1.5, Paragraph 1.5.2. In 1.5.2., the RFP instructs respondents to describe "your professional relationships with Small Rural Hospitals" Is this request specific to New Hampshire-base Small Rural Hospitals, or is national experience with Small Rural Hospitals relevant?	See Addendum #1. This is specific to small rural hospitals in New Hampshire.
7.	Section 3, Subsection 3.2, Paragraph 3.2. 4 Other than the Certificate of Insurance and New Hampshire Certificate of Good Standing, what licenses, certificates, and permits are required as referenced in 3.2.4.?	Please see Section 3.2.5 and 3.2.7.